



Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

## Comments

[illegible][illegible][illegible][illegible][illegible][illegible]

C													Area Code and Number																
2	I	V	A	N		P	L	A	C	K	O		D	I	R		Q	A		7	0	8	9	4	9	3	0	5	7

C R	M	E	D	L	I	N	E		I	N	D	U	S	T	R	I	E	S					(SAC) 0000, PL
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☐ 6. Off-Specification Used Oil Fuel

☐ a. Generator Marketing to Burner

☐ b. Other Marketer

☐ c. Burner

☐ 7. Specification Used Oil Fuel Marketer (or On site Burner)  
Who First Claims the Oil Meets the Specification

☐ A. Utility Boiler      ☐ B. Industrial Boiler      ☐ C. Industrial Furnace

☐ A. Air      ☐ B. Rail      ☒ C. Highway      ☐ D. Water      ☐ E. Other (specify)

☒ A. First Notification      ☐ B. Subsequent Notification  
(complete item C)

C. Installation's EPA ID Number

## ID - For Official Use Only

C																		T/A	C
W																			1

**X. Description of Hazardous Wastes (continued from front)**

**A. Hazardous Wastes from Nonspecific Sources.** Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F 0 0 1	D 0 0 1				
7	8	9	10	11	12

**B. Hazardous Wastes from Specific Sources.** Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

**C. Commercial Chemical Product Hazardous Wastes.** Enter the four-digit number 40 CFR Part 261.33 for each chemical substance your installation handles which may be hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

**D. Listed Infectious Wastes.** Enter the four-digit number 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

**E. Characteristics of Nonlisted Hazardous Wastes.** Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24)

- ☐ 1. Ignitable (D001)
 ☐ 2. Corrosive (D002)
 ☐ 3. Reactive (D003)
 ☐ 4. Toxic (D000)

**XI. Certification**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature



Name and Official Title (type or print)

President / DYNACOR DIVISION

Date Signed

11/27/89

**Estimated burden:** Public reporting burden for this collection of information is estimated to be 3 hours, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

United States Environmental Protection Agency  
Washington, DC 20460

## Notification of Hazardous Waste Activity

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

## For Official Use Only

## Comments

C N JAN 12 1990

## Installation's EPA ID Number

## Approved

Date Received  
(yr. mo. day)

RECEIVED

C F IL D 0 2 5 4 6 0 9 0 8 T/A C 1 A 89 1 20 6

## I. Name of Installation

M E D L I N E I N D U S T R I E S

## II. Installation Mailing Address

## Street or P.O. Box

C 3 O N E M E D L I N E P L A C E

## City or Town

## State

## ZIP Code

C 4 M U N D E L E I N I L 6 0 0 6 0

## III. Location of Installation

## Street or Route Number

C 5 S A M E

## City or Town

## State

## ZIP Code

C 6

## IV. Installation Contact

## Name and Title (last, first, and job title)

Phone Number  
(area code and number)

C 2 I V A N P L A C K O D I R Q A 7 0 8 9 4 9 3 0 5 7

## V. Ownership

## A. Name of Installation's Legal Owner

B. Type of Ownership  
(enter code)

C R M E D L I N E I N D U S T R I E S P

## VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

## A. Hazardous Waste Activity

## B. Used Oil Fuel Activities

- 1a. Generator ☒ 1b. Less than 1,000 kg/mo.  
☐ 2. Transporter  
☐ 3. Treater/Storer/Disposer  
☐ 4. Underground Injection  
☐ 5. Market or Burn Hazardous Waste Fuel  
(enter 'X' and mark appropriate boxes below)  
☐ a. Generator Marketing to Burner  
☐ b. Other Marketer  
☐ c. Burner

- ☐ 6. Off-Specification Used Oil Fuel  
☐ a. Generator Marketing to Burner  
☐ b. Other Marketer  
☐ c. Burner  
☐ 7. Specification Used Oil Fuel Marketed to Burner  
Who First Claims the Oil Meets the Specification

## VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

- ☐ A. Utility Boiler ☐ B. Industrial Boiler ☐ C. Industrial Furnace

## VIII. Mode of Transportation (transporters only - enter 'X' in the appropriate box(es))

- ☐ A. Air ☐ B. Rail ☒ C. Highway ☐ D. Water ☐ E. Other (specify)

## IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

- ☒ A. First Notification ☐ B. Subsequent Notification  
(complete item C)

## C. Installation's EPA ID Number

19 Lake

## ID - For Official Use Only

C																		T/A	C
W																			1

**X. Description of Hazardous Wastes (continued from front)**

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☒ 1. Ignitable (D001)    ☐ 2. Corrosive (D002)    ☐ 3. Reactive (D003)    ☐ 4. Toxic (D000)

**XI. Certification**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature

L. J. Stiles

Name and Official Title (type or print)

PRESIDENT / DYNACOR DIVISION

Date Signed

11/27/85

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UNITED STATES  
ENVIRONMENTAL PROTECTION AGENCY

REGION 5  
RCRA ACTIVITIES  
P.O. BOX A3587  
CHICAGO, ILLINOIS 60690

05 FEB 1990

Dear Notifier:

Enclosed you will find the U.S. Environmental Protection Agency (U.S. EPA) Identification (ID) number that has been assigned to your installation. This ID number must appear on all manifest forms when transporting hazardous waste. You will find your ID number on the second line of the copy of the enclosed notification form. This letter confirms that you have filed a Notification of Hazardous Waste Activity (form 8700-12) to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). This letter and the enclosed copy of the notification form should be retained for future use.

If your facility is in the state of Michigan and you were previously issued an ID number with an MIG prefix, do not use the MIG number. This is a state number. Be sure to use the MID number only.

If you have any further questions regarding hazardous waste activity, please contact the Region V Solid Waste Hotline at (312) 886-4001.

Sincerely yours,

Arthur S. Kawatachi  
Information Section  
Office of RCRA

Enclosure

66-42140